



IMPLEMENTING REFORM

Our Mission

North Carolina will provide people with or at risk of mental illness, developmental disabilities and substance abuse problems and their families the necessary prevention, intervention, treatment, services and supports that they need to live successfully in communities of their choice.

Quarterly Updates

The progress of reform will be posted on the Division's web site for all to see:
<http://www.dhhs.state.nc.us/mhddsas/>

Comments or Questions about the Operations Plan?

Email us:
Steven.Hairston@ncmail.net

Mail to:
Steven Hairston,
Planning Team Leader
DMH/DD/SAS
3003 Mail Service Center
Raleigh, NC 27699-3003

SUMMARY OF OPERATIONS PLAN 2003-2004

Calling for the first major reform in 30 years, the North Carolina Legislature passed Session Law 2001-437 that requires sweeping changes in our state's public system for people with mental illness, developmental disabilities and substance abuse problems.

This legislation was followed by *State Plan 2001: Blueprint for Change*, the state's plan for implementing system reform over a five-year period. An update to the state plan is published each July including public feedback, progress reports and the next year's plans.

State Plan 2002 included more details on financing reform, on consumer involvement and on services and supports to be provided.

State Plan 2003 provides an overview of continued progress and lays the foundation for the key activities and events that must occur in the upcoming year to keep reform moving forward.

New this year is the state Operations Plan, which specifies the outcomes to be achieved and products to be delivered by June 30, 2004. Responsibilities for



Richard Visingardi, Director
DMH/DD/SAS

these outcomes and products have been assigned to Division team leaders. The development process will include people with an interest in how the system works (stakeholders).

OUTCOMES AND DELIVERABLES

Key developments must occur during the state's fiscal year 2003-2004 to accomplish reform. Many tasks must be completed.

The outcomes, activities and deliverables specified in Chapter 6 of *State Plan 2003* have been detailed

and categorized into four areas:

- Management and Leadership
- Finance
- Programmatic Issues
- Administration and Contracts.

Each of the four areas has a specific set of tasks that must be completed in order to successfully accomplish the outcome.

The outcome and key tasks for each area are shown on the next page.

MANAGEMENT AND LEADERSHIP

Outcome: *To implement a structure to operationalize the State Plan that ensures integration, communication, coordination and transition for the various stakeholders at the state and local level.*

Key Tasks:

- Establish a departmental project team.
 - Submit quarterly reports on system reform to the Legislative Oversight Committee.
 - Publish *State Plan 2004*.
 - Coordinate implementation with the Division Stakeholder Group and the Public Policy Work Group.
 - Hire a clinical director.
 - Conduct a comprehensive evaluation of reform.
-

FINANCE

Outcome: *To implement a financial strategy that advances the reformed service delivery system while fostering strong accountability.*

Key Tasks:

- Establish the long-term financial plan including identification of revenues and transition implementation steps.
 - Establish funding for LME services based upon the cost model.
 - Establish methodology for service rates to providers.
 - Coordinate bed day allocation plans for hospitals and ADATCs.
-

PROGRAMMATIC ISSUES

Outcome: *To establish a service delivery system that is person-centered and family focused and promotes best practices.*

Key Tasks:

- Complete the child mental health plan.
 - Write service definitions.
 - Modify rules to support mental health reform.
 - Develop a consolidation plan for hospitals.
 - Establish a comprehensive prevention plan.
-

ADMINISTRATION AND CONTRACTS

Outcome: *To establish the administrative functions required to implement the management, financial and programmatic systems.*

Key Tasks:

- Establish a state and local consumer/family advisory committee (CFAC) operations plan.
 - Develop a comprehensive appeals process.
 - Establish state and local monitoring requirements including protocols and audits procedures.
 - Facilitate the integration of information technology between facilities.
-